

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			IND	DEP	IND	DEP	IND	DEP
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.	2												
TOTAL DEP.	14	↔	↔	↔									
TOTAL CLAIMS	18	↔	↔	↔									
TOTAL IND.													
TOTAL DEP.													
TOTAL CLAIMS													